	, PATENT	FAPPLICAT Effe	ION FEE	DETERA ober 1, 2	AINAT	TÓN REC	COR	1	99 MS		4310	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF		R THAN L ENTITY
Ľ	OTAL CLAIM	S	5	1					FEE		RATE	T
F	OR		NUMB	NUMBER FILED		NUMBER EXTRA		BASIC FI		-	BASIC FE	+
Ī	OTAL CHARGE	57	57 minus 20=		. 77		X\$ 9=		7	1/0/0	—	
IN	DEPENDENT	7	7 minus 3 =		4			_			1000	
М	ULTIPLE DEPI	ENDENT CLAIM	PRESENT			† _□	1	X40=	-	_OR	X80=	320
•	f the differenc		+135=		OR	+270=						
If the difference in column 1 is less than zero, enter of in column 2								TOTAL		OR	TOTAL	1696
۲	70 00	(Column 1)	AMENDE	(Column 2) (Column 3)			3)	SMALL	ENTITY	·OR		R THAN ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	1.50	Minus	- 5	7	- 0	1	X\$ 9=		OR	X\$ 博 =	
AM	Independent	ENTATION OF M	Minus	EPENDENT	O ABA	- /_	41	X40=		OR	7.00. w	200,00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	,
6	-28-05						į	TOTAL		-	TOTAL	20200
_		(Column 1)		(Colum	n 2)	(Column 3		VODIT. FEE			ADDIT. FEE	4
AMENDMENT B	~~	CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID P	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 50	Minus	- 5	7	- 0	\prod	X\$ 9=	1	OR	X\$18=	Ò
	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT C	TI AIM	- 0	4 [X40=		OR	X80=	Õ
					oco-villa.		, [+135=		OR	+270=	0
							A	YOTAL DOIT, FEE		OR ,	TOTAL DOIT, FEE	0
-		(Column 1)		(Column		Column 3)						
AMENDMEN! C		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	•	Minus	••		•		X\$ 9=		OR	X\$18=	FEE
	Independent		Minus	***			1 H	X40=		-		
1	FIRST PRESE	NTATION OF ML	ILTIPLE DE	PENDENT C	LAIM		1 -	~~		OR	X80=	
. 11	the entry in colum	135=		OR	+270=							
(I	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.											

FORM PTO-675 (Rev. 8/00)

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